**JACKSON-TOUGALOO ALUMNI CHAPTER**

Post Office Box 539

Tougaloo, MS 39174-0539

**MEMBERSHIP APPLICATION 2019-2020**

Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Referred By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Membership Type Sub-type**

□ New Membership □ TC Graduate

□ Renewal □ Former Student

 □ Friend

 □ TC Faculty/Staff

Class Year: \_\_\_\_\_\_\_\_\_\_\_\_\_ Area of Expertise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Prefix (Mr., Mrs., Ms., etc) First Maiden Last

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip Code

Telephone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home Business Cell

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP DUES**

□ Local Annual Membership $ 20.00

 **TOTAL Amount Enclosed: $ \_\_\_\_\_\_\_\_\_\_\_**

*Please make check/money order payable to: Jackson-Tougaloo Alumni Chapter*

We are looking forward to an exciting year! Please indicate below on which committee(s) you would like to serve.

□ Special Projects □ Program

□ Membership □ Student Recruitment

□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return your completed form with payment to:

***Membership Committee***

***Jackson-Tougaloo Alumni Chapter***

***P.O. Box 539***

***Tougaloo, MS 39174-0539***

**“WHERE HISTORY MEETS THE FUTURE”**

*Membership Committee Only:*

|  |  |  |  |
| --- | --- | --- | --- |
| RECD: | PEND: | CLRD: | MAIL/CONF: |